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## UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Altorney Docket No.						
First Inventor	Roshan et al.					
Title	A SEMICONDUCTOR DEVICE					
Express Mail Label No.	EV164824949US					

VAMAPO924TIS

	<del></del>				
See MPEP o	APPLICATION ELEMENTS chapter 600 concerning utility patent application contents.	ADDRESS TO: Commiss P.O. Box	Patent Applicationer for Pate 1450 ia VA 22313-	ents	
See 37 3. Specific (preferr - Describer - Referror a c - Backg - Brief 1 - Detail - Claim	red arrangement set forth below) iptive title of the invention Reference to Related Applications ment Regarding Fed sponsored R & D ence to sequence listing, a table, omputer program listing appendix ground of the Invention Summary of the Invention Description of the Drawings (if filed) ed Description	7. CD-ROM or CD-R in dupl Computer Program (Appe 8. Nucleotide and/or Amino Acid (if applicable, all necessary) a. Computer Readable b. Specification Seque i. CD-ROM or C ii. Paper c. Statements verifying	endix) Sequence Form (CRF ence Listing CD-R (2 copi	Submission  ion: ies); or above copies	
4. Prawir Info 5. Oath or Dec a. No Net b. Cop (for i	ng(s) (35 U.S.C. 113) [Total Sheets 6 ]  Instant I [Total Sheets 2 ]  My executed (original or copy)  Insigned  Total Sheets 2 ]  My executed (original or copy)  Insigned  Total Sheets 2 ]  Insigned  Insign		ent [	Power of Attorney pplicable) Copies of IDS Citations  33) 3(s) J.S.C. 122 prm PTO/SB/35	
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:					
Continuation  Divisional  Continuation-in-part (CIP)  of prior application No.:  Prior application information:  Examiner  Art Unit:  For CONTINUATION OR DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.  The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.					
	19. CORRESPON	DENCE ADDRESS			
Customer Number:  OR Correspondence address below					
Name	Mark D. Saralino				
Address	1621 Euclid Avenue, Nineteenth Floor				
City	Cleveland	State Ohio	Zip Code   44115-2191		
Country	U.S. Te	elephone (216) 621-1113	Fax	(216) 621-6165	
Name (Print/Type)   Mark D. Saralino ,   Registration No. (Attorney/Agent)   34,243					
Signature	Mel Jak		Data	04/01/2004	

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

U.S

PTO/SB/17 (10-03) Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Application Number

Attorney Docket No.

## FEE TRANSMITTAL for FY 2004

(\$)878.00

Effective 10/01/2003. Patent fees are subject to annual revision.

Mark D. Saralino

Name (Print/Type)

Signature

\_\_\_ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Filing Date	Herewith				
First Named Inventor	Roshan et al.				
Examiner Name	Not yet assigned				
Art Unit	Not yet assigned				

YAMAP0924US

Not yet assigned

Complete if Known

METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)					
Check Credit card Money Other None			3. ADDITIONAL FEES					
Deposit Account:			Entity					
Deposit	10,000		Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Account Number	18-0988		1051	130	2051	65	Surcharge - late filing fee or oath	
Deposit Account	Renner, Otto, Boisselle & Sklar, LLP		1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
Name	authorized to: (check all that apply)		1053	130	1053	130	Non-English specification	
	(s) indicated below Credit any over	erpayments	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
	additional fee(s) or any underpayment of f		1804	920*	1804	920*	Requesting publication of SIR prior to	
I= ' '	(s) indicated below, except for the filing for	` '	1805	1,840*	1805	1 840*	Examiner action Requesting publication of SIR after	
	entified deposit account.		1000	1,040	1005	1,040	Examiner action	
	FEE CALCULATION		1251	110	2251	55	Extension for reply within first month	
1. BASIC FI	LING FEE		1252	420	2252	210	Extension for reply within second month	
Large Entity S			1253	950	2253	475	Extension for reply within third month	
	Fee Fee Sescription Code (\$)	Fee Paid	1254	1,480	2254	740	Extension for reply within fourth month	
	2001 385 Utility filing fee	770 00	1255	2,010	2255	1,005	Extension for reply within fifth month	
1002 340	2002 170 Design filing fee	770.00	1401	330	2401	165	Notice of Appeal	
1003 530	2003 265 Plant filing fee		1402	330	2402	165	Filing a brief in support of an appeal	
1004 770	2004 385 Reissue filing fee		1403	290	2403	145	Request for oral hearing	
1005 160	2005 80 Provisional filing fee		1451	1,510	1451	1,510	Petition to institute a public use proceeding	
	SUBTOTAL (1) (\$) 77	0.00	1452	110	2452	55	Petition to revive - unavoidable	
2 EVIDA C			1453	1,330	2453	665	Petition to revive - unintentional	
Z. EXTRA C	LAIM FEES FOR UTILITY AND	1	1501	1,330	2501	665	Utility issue fee (or reissue)	
Total Claims	Extra Claims below	Fee Paid	1502	480	2502	240	Design issue fee	
Independent	26 -20** = 6 X 18	= 108	1503	640	2503	320	Plant issue fee	
Claims Multiple Deper	2 - 3** = X X	=0.00	1460	130	1460	130	Petitions to the Commissioner	
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Large Entity Fee Fee	Small Entity Fee Fee Fee Description		1806	180	1806		Submission of Information Disclosure Stmt	
Code (\$)	Code (\$)		8021	40	802	1 40	Recording each patent assignment per property (times number of properties)	
1202 18 1201 86	2202 9 Claims in excess of 20 2201 43 Independent claims in ex	cess of 3	1809	770	2809	385	Filing a submission after final rejection	
1203 290	2203 145 Multiple dependent claim	-	1810	770	2810	385	(37 CFR 1.129(a)) For each additional invention to be	
1204 86	2204 43 ** Reissue independent over original patent	claims					examined (37 CFR 1.129(b))	
1205 18	2205 9 ** Reissue claims in exce	ess of 20	1801 1802	770 900	2801 1802	900	Request for Continued Examination (RCE)  Request for expedited examination	
'	and over original pater	——————————————————————————————————————	0.5	foo /= -	naie i		of a design application	<del></del>
SUBTOTAL (2) (\$) 108.00			Other fee (specify)  *Reduced by Basic Filing Fee Paid  SUBTOTAL (2) (\$) 0.00					
**or number previously paid, if greater; For Reissues, see above				Joeu by	Jasic I	anny F	SUBTOTAL (3) (\$) 0.00	
SUBMITTED	NV.						(Complete (if applicable))	

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Registration No.

34,243

Telephone (216) 621-1113

04/01/2004

## **CERTIFICATION UNDER 37 CFR 1.10**

I hereby certify that the attached patent	application (along with any other paper referred		
to as being attached or enclosed) is being	g deposited with the United States Postal Service		
on this date April 1, 2004	, in an envelope as "Express Mail Post Office		
to Addressee" Mailing Label Number	EV164824949US addressed to: Mail Stop		
Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.			
Mark D. Saralino			
Typed or Printed Name of Person Mailin	g Paper É		
Mel S. fat	8		
(Signature of Person Mailing Paper)			